

**MULTIPLE DEPEN CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FO PTO-875)**

SERIAL NO.

0 / 568828

FILING DATE

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
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48		1				
49		1				
50		1				
TOTAL IND.	1		↓		↓	
TOTAL DEP.	35		↔		↔	
TOTAL CLAIMS	36		██████████		██████████	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						